

**TEMPORARY USE
REGULATIONS AND CHECKLIST
TEMPORARY MODEL HOME/SALES FACILITY**

REGULATIONS:

- **REFER TO §25.16 OF THE CARMEL ZONING ORDINANCE FOR THE FOLLOWING REGULATIONS:**
- **PERMITTED ZONING DISTRICTS:** May be permitted in all zoning districts as a temporary use **ONLY**, provided the use would NOT detrimentally affect the health, welfare, safety, or morals of the neighborhood under construction.
- **DURATION OF TEMPORARY USE:** This permit is valid for eighteen (18) months. Upon written request to the Department of Community Services, this permit may be extended for increments of six (6) months, but may not exceed thirty-six (36) months total for temporary use. (The extension fee is \$85.50 per extension.) It is the responsibility of the applicant to apply for a permit extension prior to expiration of the permit. Any sales facility operating without a valid permit shall be considered a civil zoning violation subject to enforcement action by the City of Carmel.
- **SIGNAGE:**
 - **SALES OFFICE:** One ground sign is permitted per one hundred lots and may NOT be larger than thirty (30) square feet in size and may NOT be taller than six (6) feet in height. Sign(s) must be located on the same lot as approved temporary sales office and shall not interfere with Vision Clearance and shall be a minimum of ten (10) feet from the street right-of-way.
 - **SIGN PERMITS:** Sign permits are required for signs over six (6) square feet and expire when this 'temporary use' permit expires. ADLS petition. For questions regarding Plan Commission approval, please contact Rachel Boone, Planning Administrator in the Planning and Zoning Department at (317)- 571-2417.

CHECKLIST FOR APPLICATION:

1. ☐ **TEMPORARY USE APPLICATION:** Two (2) copies of completed application are required with signatures.
 - a. **ADDRESS:** If the permanent address for the property is unknown, you should contact Operations Supervisor William Akers of the Department of Communications at (317) 571-2586 or at wakers@carmel.in.gov.
2. ☐ **LEGAL DESCRIPTION:** Provide a legal description of the platted lot on which the temporary use will utilize.
3. ☐ **SIGN PLAN:** Signs must comply with regulations as outlined above, if over six (6) square feet, a temporary sign permit is required. If a sign permit is required, submit the following with this temporary use application: a copy of the signage approved by the Plan Commission with either the Primary Plat or a subsequent ADLS petition, a copy of the Letter of Grant, the Docket Number: _____, and the Date of Approval: _____. (§25.07.03-07.j)
4. ☐ **SITE PLAN:** Two (2) copies are required which shows the following information:
 - a. Adjacent public road right-of-way
 - b. Location and footprint of temporary sales office structure on the property; show applicable setbacks from the public right-of-way and adjacent property lines.
 - c. Adequate access and off-street parking facilities.
 - d. Photometric plan showing light intensity at the lot lines. If no lighting is to be installed, submit a written statement to this effect.
 - e. Location and diagram/illustration of **ALL** signs, regardless of whether or not a sign permit is required.
5. ☐ **CERTIFICATE OF OCCUPANCY (C/O):** A copy of the Final Certificate of Occupancy. If this temporary use application is being submitted concurrently with the Improvement Location Permit (ILP) application, the temporary use permit shall NOT be considered valid until a Final Certificate of Occupancy has been issued. **A SALES OFFICE SHALL NOT BE ESTABLISHED IN A PERMANENT STRUCTURE UNTIL BOTH A FINAL CERTIFICATE OF OCCUPANCY AND A TEMPORARY USE PERMIT HAS BEEN ISSUED.**
 - a. If a home has received a Temporary Use permit to utilize the home for a Temporary Sales Office, a remodel permit will be required upon the termination of the temporary use permit. Before a Final C/O will be issued to allow the home to not be used other than a Model Home or Temporary Sales Office, the Remodel permit must be obtained.

APPLICATION REVIEWED BY: _____

TEMPORARY USE FEE: _____

VALID UNTIL: _____

SIGN PERMIT FEE: _____

SITE INSPECTION FEE: _____

TOTAL DUE: _____



CITY OF CARMEL / CLAY TOWNSHIP

PHONE: 317-571-2444

FAX: 317-571-2999

Permit # _____

**TEMPORARY USE APPLICATION
MODEL HOME/SALES FACILITY**

BUILDER OF RECORD:

APPLICANT

NAME: _____ **PHONE:** _____ **FAX:** _____

BUILDERS NAME: _____ **PHONE:** _____ **FAX:** _____

STREET

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

BUILDER'S EMAIL ADDRESS: _____ **BEST METHOD OF CONTACT:** _____

SUBDIVISION INFORMATION:

SUBDIVISION NAME AND LOT NUMBER: _____

BUILDING PERMIT# _____

ADDRESS OF PROPOSED USE: _____

CERTIFICATION AND NOTICE OF INTENT TO COMPLY

IT IS THE RESPONSIBILITY OF THE APPLICANT TO APPLY FOR THE PERMIT EXTENSIONS PRIOR TO EXPIRATION OF THE PERMIT. ANY TEMPORARY CONSTRUCTION FACILITY OPERATING WITHOUT A VALID PERMIT SHALL BE CONSIDERED A CIVIL ZONING VIOLATION SUBJECT TO ENFORCEMENT ACTION BY THE CITY OF CARMEL.

I HEREBY CERTIFY THAT I HAVE THE AUTHORITY TO MAKE THE FOREGOING APPLICATION, THAT THE APPLICATION AND PLANS FILED WITH THE APPLICATION ARE CORRECT, AND THAT THE OPERATION AND CODUCT OF THE TEMPORARY USE WILL CONFROM TO THE REGULATIONS OF THE CARMEL ZONING ORDINANCE. FAILURE TO COMPLY WITH THE TERMS AND CONDITIONS OF THIS PERMIT MAY RESULT IN A CITATION AND ADDITIONAL FEES.

SIGNATURE OF APPLICANT(REQUIRED) DATE

SIGNATURE OF PROPERTY OWNER (REQUIRED) DATE